

Appendix A-7: Newborn (NEWB-1) Measure Rate Calculation Rules

NEWB-1 Measure Rules Effective as of Q3- 2021 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

X - Case will be rejected, not in measure population

B - Case will be excluded, not in measure population

D - In measure population, excluded from numerator

E - In measure population, included in numerator

Data Element Sequence # / Name	Rule
1 Episode of Care	continue if value = NEWB-1, otherwise assign to Category X
2 Provider Name	assign to Category X if field is empty (i.e., no characters)
3 Provider ID	check against Provider ID table, assign to Category X if missing or no match
4 First Name	assign to Category X if field is empty (i.e., no characters)
5 Last Name	assign to Category X if field is empty (i.e., no characters)
6 Birthdate	assign to Category X if field is empty (i.e., no date)
7 Sex	assign to Category X if field is empty (i.e., no characters)
8 Race	check against Race Code table, assign to Category X if missing or no match
9 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
10 Patient ID	assign to Category X if field is empty (i.e., no characters)
11 Admission Date	date cannot be after Discharge Date, if so, assign to Category X
	assign to Category X if field is empty or invalid (i.e., no date)
12 Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date
	assign to Category X if field is empty or invalid (i.e., no date)
13 Payer Source	continue if valid value, otherwise assign to Category X
14 MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)
15 Length of Stay	if value = >120 days, assign to Category B
16 ICD-10-CM Other Diagnosis Code	if value = on table 11.21, assign to Category B
17 ICD-10-CM Principal or Other Procedure Code	if value = on table 11.22, assign to Category B
18 Discharge Disposition	if value = 4, 5, 6, assign to Category B/ assign to Category X if missing or no match
19 Term Newborn	if value = 2 or 3, assign to Category B/ assign missing value to Category X
20 Admission to NICU	if value = Y, assign to Category B/ assign missing value to Category X
21 Exclusive Breast Milk Feeding	if value = N, assign to Category D / assign missing value to Category X
	if value = Y, assign to Category E
$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$	

Appendix 7: Maternity (MAT-4) Measure Rate Calculation Rules

MAT-4 Measure Rules Effective as of Q3- 2021 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X - Case will be rejected, not in measure population
- B - Case will be excluded, not in measure population
- D - In measure population, excluded from numerator
- E - In measure population, included in numerator

Data Element Sequence # / Name	Rule
1 Episode of Care	continue if value = MAT-4, otherwise assign to Category X
2 Provider Name	assign to Category X if field is empty (i.e., no characters)
3 Provider ID	check against Provider ID table, assign to Category X if missing or no match
4 First Name	assign to Category X if field is empty (i.e., no characters)
5 Last Name	assign to Category X if field is empty (i.e., no characters)
6 Birthdate	assign to Category X if field is empty (i.e., no date)
7 Sex	continue if value = F, otherwise assign to Category X
8 Race	check against Race Code table, assign to Category X if missing or no match
9 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
10 Patient ID	assign to Category X if field is empty (i.e., no characters)
11 Admission Date	date cannot be after Discharge Date, if so, assign to Category X assign to Category X if field is empty or invalid (i.e., no date)
12 Discharge Date	continue if date is within submission time frame, otherwise assign to Category X/ cannot be prior to admit date assign to Category X if field is empty or invalid (i.e., no date)
13 Discharge Disposition	check against Discharge Disposition Code table, assign to Category X if missing or no match
14 Payer Source	continue if valid value, otherwise assign to Category X
15 MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)
16 ICD-10-CM Principal or Other Diagnosis Code	if value = on table 11.09, assign to Category B / assign missing value to Category X
17 ICD-10-CM Principal or Other Diagnosis Code	if value = none on table 11.08, assign to Category B
18 Gestational Age	if value = < 37 or UTD, assign to Category B / assign missing value to Category X
19 Previous Live Births	if value = Y, assign to Category B / assign missing value to Category X
20 ICD-10-PCS Principal or Other Procedure Code	if value = none on table 11.06, assign to Category D if value = on table 11.06, assign to Category E

MEASURE RATE =

$$\frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$

Appendix A-7 Care Coordination (CCM-1) Measure Rate Calculation Rules

CCM-1 Measure Rules Effective as of Q1-2022 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X - Case will be rejected, not in measure population
- B - Case will be excluded, not in measure population
- D - In measure population, excluded from numerator
- E - In measure population, included in numerator

Data Element Sequence # / Name

1	Episode of Care	continue if value = CCM, otherwise assign to Category X
2	Provider Name	assign to Category X if field is empty (i.e., no characters)
3	Provider ID	check against Provider ID table, assign to Category X if missing or no match
4	First Name	assign to Category X if field is empty (i.e., no characters)
5	Last Name	assign to Category X if field is empty (i.e., no characters)
6	Birthdate	assign to Category X if field is empty (i.e., no date)
7	Sex	assign to Category X if field is empty (i.e., no characters)
8	Race	check against Race Code table, assign to Category X if missing or no match
9	Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
10	Patient ID	assign to Category X if field is empty (i.e., no characters)
11	Admission Date	date cannot be after Discharge Date, if so, assign to Category X assign to Category X if field is empty or invalid (i.e., no date)
12	Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date assign to Category X if field is empty or invalid (i.e., no date)
13	Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X if missing or no match
14	Payer Source	continue if valid value, otherwise assign to Category X
15	MassHealth Member ID	assign to Category X if field is empty or invalid(i.e., no characters)
16	Reconciled Medication List	if value = N, assign to Category D / assign missing value to Category X if value = Y, assign to Category E

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$

Appendix A-7 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective as of Q1- 2022 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X - Case will be rejected, not in measure population
- B - Case will be excluded, not in measure population
- D - In measure population, excluded from numerator
- E - In measure population, included in numerator

Data Element Sequence # / Name	Rule
1 Episode of Care	continue if value = CCM, otherwise assign to Category X
2 Provider Name	assign to Category X if field is empty (i.e., no characters)
3 Provider ID	check against Provider ID table, assign to Category X if missing or no match
4 First Name	assign to Category X if field is empty (i.e., no characters)
5 Last Name	assign to Category X if field is empty (i.e., no characters)
6 Birthdate	assign to Category X if field is empty (i.e., no date)
7 Sex	assign to Category X if field is empty (i.e., no characters)
8 Race	check against Race Code table, assign to Category X if missing or no match
9 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
10 Patient ID	assign to Category X if field is empty (i.e., no characters)
11 Admission Date	date cannot be after Discharge Date, if so, assign to Category X assign to Category X if field is empty or invalid (i.e., no date)
12 Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date assign to Category X if field is empty or invalid (i.e., no date)
13 Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X if missing or no match
14 Payer Source	continue if valid value, otherwise assign to Category X
15 MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)

Appendix A-7 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective as of Q1- 2022 discharges

Data Element Sequence # / Name	Rule
16 Transition Record	if value = N, assign to Category D / assign missing value to Category X
17 Reason for Inpatient Admission	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
18 Medical Procedures & Tests	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
19 Discharge Diagnosis	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
20 Current Medication List	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
21 Studies Pending at Discharge	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
22 Patient Instructions	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
23 Advance Care Plan	if patient < 18, go to data element Contact Information 24/7 (Sequence #24) assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
24 Contact Information 24 hrs/ 7 days	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
25 Contact Information Studies Pending	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
26 Plan for Follow-Up Care	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
Primary Physician/ Health Care Professional Designated for Follow-Up	
27 Care	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
28 <i>calculated value</i>	if patient <18 and transition record counter < 10, assign to Category D if patient <18 and transition record counter = 10, assign to Category E if patient >= 18 and transition record counter < 11, assign to Category D if patient >= 18 and transition record counter = 11, assign to Category E

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$

Appendix A-7 Care Coordination (CCM-3) Measure Rate Calculation Rules

CCM-3 Measure Rules Effective as of Q1- 2022 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X - Case will be rejected, not in measure population
- B - Case will be excluded, not in measure population
- D - In measure population, excluded from numerator
- E - In measure population, included in numerator

Data Element Sequence # / Name	Rule
1 Episode of Care	continue if value = CCM, otherwise assign to Category X
2 Provider Name	assign to Category X if field is empty (i.e., no characters)
3 Provider ID	check against Provider ID table, assign to Category X if missing or no match
4 First Name	assign to Category X if field is empty (i.e., no characters)
5 Last Name	assign to Category X if field is empty (i.e., no characters)
6 Birthdate	assign to Category X if field is empty (i.e., no date)
7 Sex	assign to Category X if field is empty (i.e., no characters)
8 Race	check against Race Code table, assign to Category X if missing or no match
9 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
10 Patient ID	assign to Category X if field is empty (i.e., no characters)
11 Admission Date	date cannot be after Discharge Date, if so, assign to Category X assign to Category X if field is empty or invalid (i.e., no date)
12 Discharge Date	continue if date is within submission time frame, otherwise assign to Category X / cannot be prior to admit date assign to Category X if field is empty or invalid (i.e., no date)
13 Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X if missing or no match
14 Payer Source	continue if valid value, otherwise assign to Category X
15 MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)
16 Patient Refusal of Transmission	assign missing value to Category X, if value = Y, assign to Category B
17 Transmission Date	if value = UTD, assign to Category D / assign missing or invalid value to Category X
18 calculated value	if (Transmission Date - Discharge Date) > 2 days, assign to Category D if (Transmission Date - Discharge Date) < 0 days, assign to Category D if (Transmission Date - Discharge Date) >= 0 and <= 2 days, assign to Category E

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$